FORM DP-9

## NEW HAMPSHIRE DEPARTMENT OF REVENUE ADMINISTRATION SMALL BUSINESS CORPORATIONS ("S" Corp) INFORMATION REPORT FOR CALENDAR YEAR 2001 DUE ON OR BEFORE MAY 1, 2002

DO NOT ATTACH TO RETURN

WHO MUST FILE	This report must be completed by every "S" corporation which has made actual or constructive distributions to its New Hampshire shareholders during the calendar year, per RSA 77:17-a.			
WHAT TO FILE	Actual distributions from "S" corporations made to New Hampshire residents are taxable to the individual recipient under New Hampshire Interest & Dividends Tax law. "S" corporations are required to use this form to report such distributions. Report any <b>actual distributions</b> from current year or prior year accumulated profits (as defined in RSA 77 and Rev 901). Do not report the shareholder's proportionate share of the "S" corporation's income or loss as shown on their Federal Schedule K-1.			
WHEN TO FILE	This report is due on or before May 1 for the preceding CALENDAR year.			
NEED HELP	Call the Audit Division at (603) 271-3400. For hearing or speed	ch impaired i	ndividuals, call TDD Access:	Relay NH 1-800-735-2964.
NAME OF "S" CORPORATION			FEDERAL EMPLOYER IDENTIFICATION NUMBER	
NUMBER & STRE	EET ADDRESS			
ADDRESS (continued)			DO NOT	
CITY/TOWN, STATE & ZIP CODE			DO NOT FILE WITH THE RETURN.  MAIL UNDER SEPARATE COVER  TO ADDRESS BELOW.	
	ampshire Residents ONLY)		Social Security Number	Amount of Distribution
	SO	CIAL SECURIT	Y NUMBER	\$
	SO	CIAL SECURIT	Y NUMBER	
	200			\$
		SOCIAL SECURITY NUMBER		\$
		SOCIAL SECURITY NUMBER		
	50	SOCIAL SECURITY NUMBER		\$
	If additional space is requi	ired, attac	h another sheet.	
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	ies of perjury, I declare that I have examined this roy a person other than the taxpayer, this declaration i			
FOR DRA USE	·			-
			OLOMATURE (III ) III O	DEDINED OTHER THAN THE PARTY OF
	SIGNATURE (IN INK) OF OFFICER		SIGNATURE (IN INK) OF PAID PR	REPARER OTHER THAN TAXPAYER DATE
	TITLE	DATE	PREPARER'S TAX IDENTIFICA	TION NUMBER
	NH DEPT OF REVENUE ADMINISTRA	TION	PREPARER'S ADDRESS	
	TO: PO BOX 457 CONCORD NH 03302-0457		CITY/TOWN STATE & ZIP CODE	